

PROJECT MOON RECORD CARD

1. DATE		2. LOCATION		3. CONCLUSIONS	
4 Nov 52		VINEYARD, NEW JERSEY		<input type="checkbox"/> Non-Reliable <input type="checkbox"/> Probably Reliable <input type="checkbox"/> Possibly Reliable	
5. DATE-TIME GROUP		6. TYPE OF OBSERVATION		<input type="checkbox"/> War Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft	
Local 01/17/2052		Ground-Vision		<input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Intercept Radar	
Day 01/22/05		A. AIR-VISION		<input type="checkbox"/> Non-Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical	
7. PHOTOS		8. SOURCE		<input type="checkbox"/> Other <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Civilian Female			
9. LENGTH OF OBSERVATION		10. NUMBER OF OBJECTS		11. COURSE	
30 seconds		Two			
12. BRIEF SUMMARY OF SIGHTING		13. COMMENTS			
Two groups of objects, or "whirling discs of light", were seen by housewife in New Jersey.		1. Unusual cloud formations present			

**TENTATIVE
OBSERVERS QUESTIONNAIRE**

Maj. Toussaint ~~French~~
44864 (18590)

22

SECTION A

1. When did you see the object:

1.1 Date: 45 119 1952
Day Month Year

1.2 Time of Day: 5 (about) 40 Hrs. Min. A.M. or P.M. (Circle One) 173

1.3 Time Zone: (Circle One):

a. Eastern d. Pacific
b. Central e. Other _____
c. Mountain

(Circle One): a. Daylight Saving
b. Standard

1.4 Circle one of the following to indicate how certain you are of your answer to the above question 1.2:

a. Certain - *except minor* c. Not very sure
 b. Fairly certain d. Just a guess

2. Where were you when you saw the object:

Postal Address Wickland New Jersey U.S.A.
City or Town State Country

Additional Remarks: I was standing on open perch facing south, waiting for daughter to finish speaking to friend inside.

3. Where were you located when you saw the object:

(Circle One): a. Inside a building d. In an airplane
b. In a car e. At sea
c. Outdoors f. Other On perch

3.1 Were you:

(Circle One):

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Flying near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

لـ ۱۰۰

4. How did you happen to notice the object? There was an unusual closed formation, which I observe always

5. When did you report to some official that you had seen the object?

Day _____ Month _____ Year _____ No report.

SECTION B

6. What were you doing at the time you saw the object? Standing, writing.

6.1 What had you been doing for the 30 minutes before you saw the object?
Try to list the activity or activities and the approximate amount of time spent on each.

Talking with friend inside house.

7. Were you moving at any time while you saw the object? (Circle One):

Yes or No

IF you answered YES, then complete the following questions:

7.1 What direction were you moving?

(Circle One): a. North e. South
b. Northeast f. Southwest
c. East g. West
d. Southeast h. Northwest

7.2 How fast were you moving? _____ miles per hour.

7.3 Did you stop at any time while you were looking at the object?

(Circle One): Yes or No

8. What direction were you looking when you first saw the object?

(Circle One): a. North
b. Northeast
c. East
d. Southeast

(e) South
(f) Southwest
(g) West
(h) Northwest

8.1 What direction were you looking when the object disappeared?

(Circle One):

- a. North
- b. Northeast
- c. East
- d. Southeast
- e. South
- f. Southwest
- g. West
- h. Northwest

8.2 Circle one of the following to indicate how certain you are of your answer to the above question and preceding question (8 and 8.1).

9. Were you wearing eye glasses when you saw the object? (Circle One):

Yes or No

10. How was the object seen?

(Circle One):

- a. Through window glass
- b. Through windshield
- c. Through binoculars
- d. Through telescope
- e. Through theodolite
- f. Through sunglasses
- g. Through open space
- h. Other _____

11. What do you remember about the weather conditions at the time you saw the object?

11.1 CLOUDS (Circle One)

11.3 WEATHER (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

- a. Dry
- b. Fog, Mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

11.2 WIND (Circle One)

11.4 TEMPERATURE (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

- a. Cold
- b. Cool**
- c. Warm
- d. Hot
- e. Don't remember

SECTION C

12. Estimate how long you saw the object?

Hours Minutes 30
Seconds

12.1 Circle one of the following to indicate how certain you are of your answer to Question 12:

a. Certain	<input type="radio"/>	Not very sure
b. Fairly sure	<input type="radio"/>	Just a guess

13. Did the object look: (Circle One) Solid or Transparent *in the sense that light is transparent*

14. Did the object at any time:

(Circle One for each question)

14.1 Change direction?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.2 Change speed?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.3 Change size?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.4 Change color?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.5 Break up into parts or explode?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.6 Give off smoke?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.7 Change brightness?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.8 Flicker, throb, or pulsate?	<u>Yes</u>	<input type="radio"/> No	Don't know
14.9 Remain motionless?	<u>Yes</u>	<input type="radio"/> No	Don't know

15. Did the object give off a light? (Circle One): Yes No Don't know

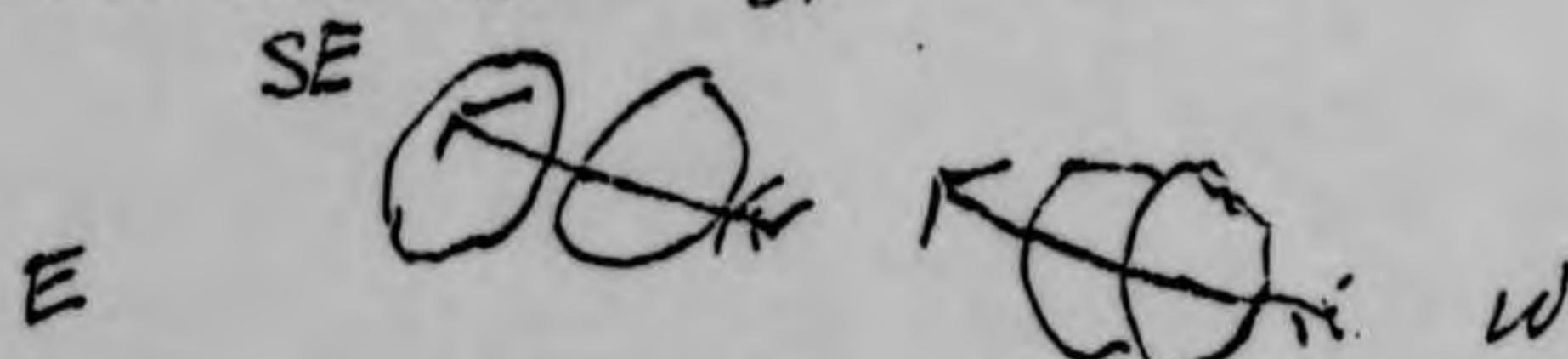
15.1 IF you answered YES, what was the color of the light? *White - or less bright*

16. Tell in a few words the following things about the object?

16.1 Sound *Could hear none.*

16.2 Color *Same as electric light.*

17. IF there was MORE THAN ONE object, then how many were there? *Two series of 2 or 3 etc.*
Draw a picture of how they were arranged and put an arrow to show the direction they were traveling. *S.*



18. Did the object at any time:

N

18.1 Move behind something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved behind.

18.2 Move in front of something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved in front of.

18.3 Blend with the background? (Circle One) Yes No Don't know

19. Which of the following objects is about the same actual size as the object you saw? (Circle One):

a. Pea	f. Automobile
b. Baseball	g. Small airplane
c. Basketball	h. Large airplane
d. Bicycle wheel	i. Dirigible
e. Office desk	j. Other

19.1 Circle one of the following to indicate how certain you are of your answer to Question 19.

- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Uncertain

20. Try to tell the following things about the object:

20.1 How high above the earth was it? abt 1000 feet.

20.2 How far was it from you? all 3000 feet or _____ miles.

20.3 How fast was it going? 300 miles per hour.

20.4 Circle one of the following to indicate how certain you are of your answer to the above questions:

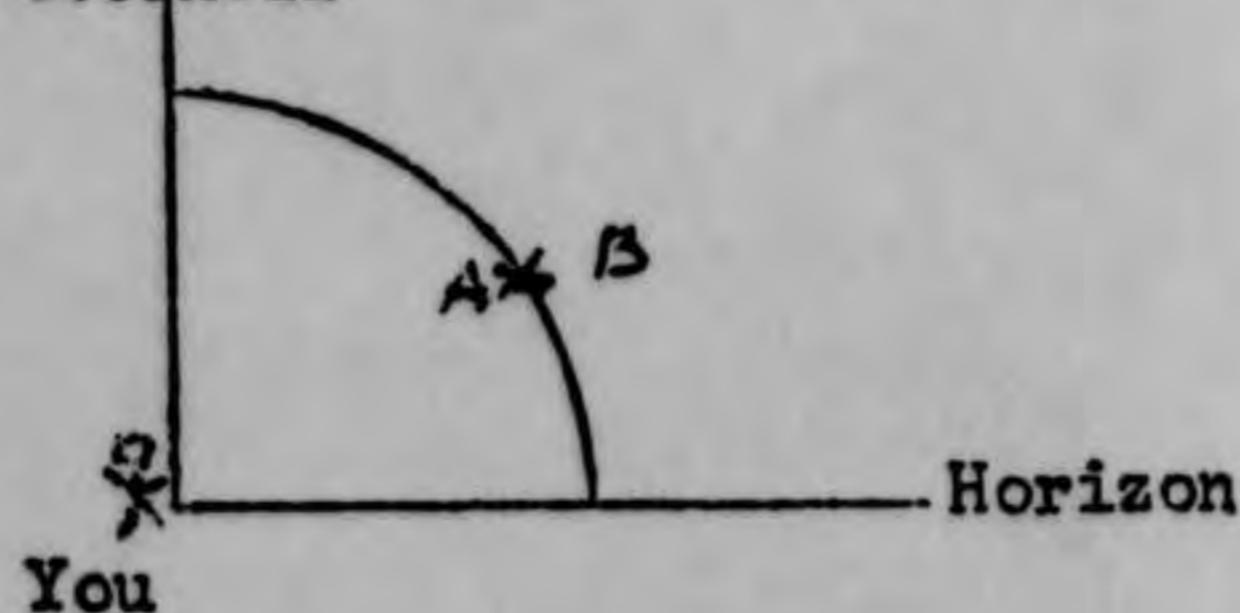
- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Just a guess

21. How did the object disappear from view?

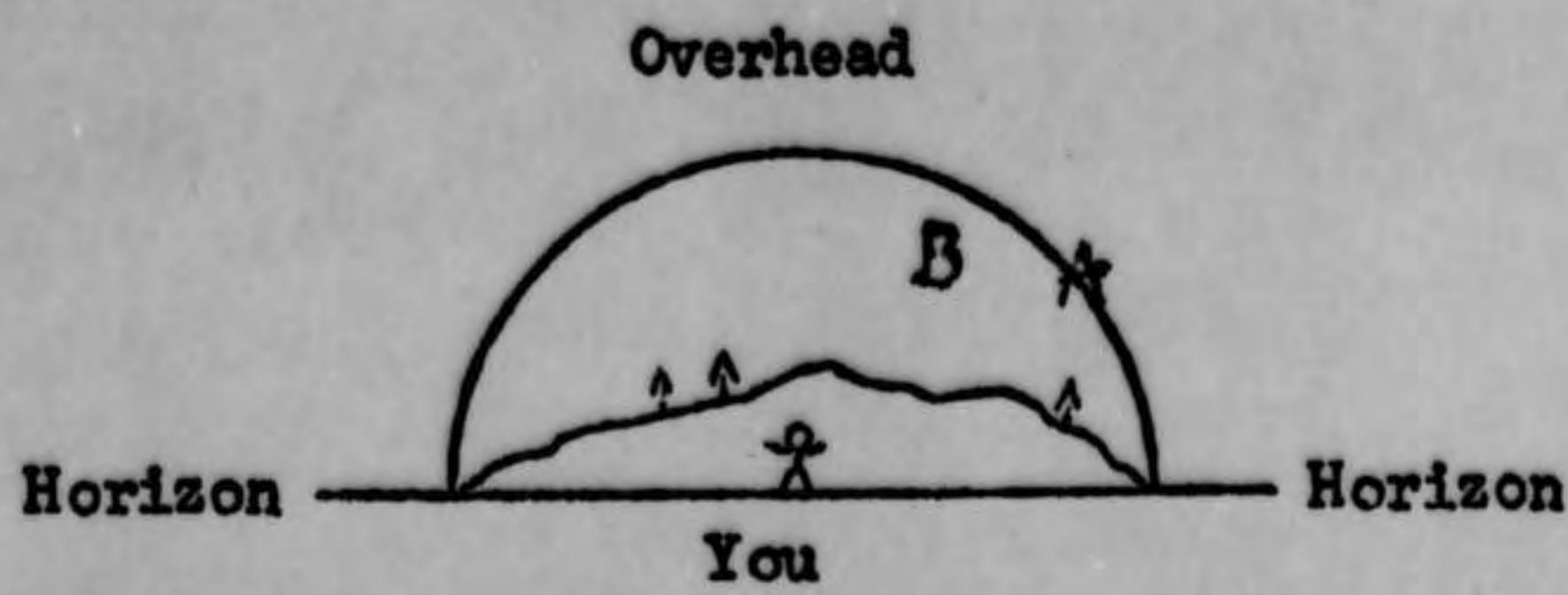
SECTION D

22. In the following sketch, imagine your eye at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" to show where it was when you last saw it. Overhead

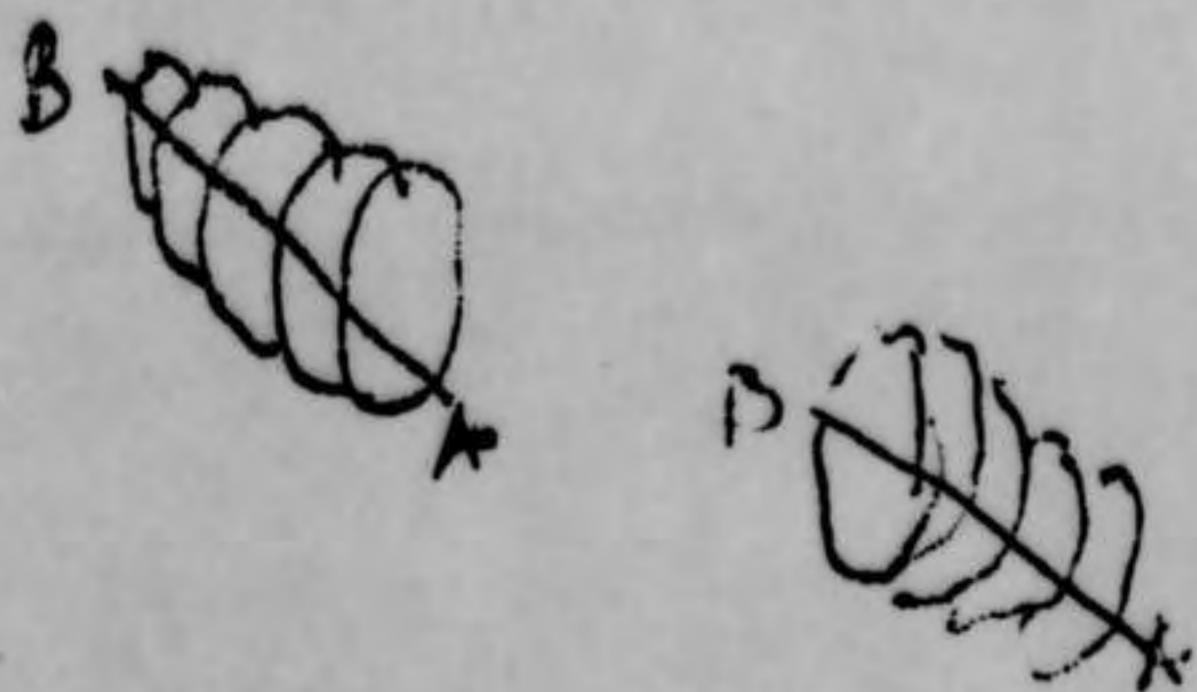
Overhead



23. In the following sketch place an "A" at the position the object was when you first saw it, and a "B" at its position when you last saw it.



24. Draw a picture that will show the motion that the object made. Place an "A" at the beginning of its path and a "B" at the end of its path.



Like whirling disks of light.

25. Draw a picture that will show the shape of the object. Label and include in your sketch any details of the object that you saw and place an arrow beside the drawing to show the direction the object was moving.



SECTION E

26. Was this the first time that you have seen an object like this?

(Circle One): Yes or No

26.1 IF you answered NO, then when, where, and under what conditions did you see other ones? _____

27. In your opinion what do you think the object was and what might have caused it?

None no idea.

28. Give the following information about yourself:

NAME _____
Last Name _____ First Name _____ Middle Name _____

ADDRESS _____ Street _____ City _____ Zone _____ State _____

TELEPHONE NUMBER 516-1400 _____

What is your present job? Housewife _____

Age 59 _____

Sex Female _____

29. Was anyone else with you at the time you saw the object?

(Circle One): Yes or No

29.1 IF you answered YES, did they see the object too?

(Circle One): Yes or No

29.2 Please list their names and addresses:

30. Please add here any further comments which you believe are important.
Use additional sheets of the same size paper, if necessary.

The cloud formations were unusual - a long, low bank near the horizon, then a clear, wide space half way to the zenith, and a lighter (both in texture and hue) series from there. The whirling disks appeared in the blank middle space.